

Waiver Office, California Department of Education  
721 Capitol Mall, Rm. 609  
Sacramento, CA 95842

CDS CODE					

District Name:		Contact/recipient of approval/denial notice:	
Address: (City) (State) (ZIP)		Phone (and extension if necessary) : ( )	
Period of Request: <b>From: 5/1/00 To: 8/1/00</b>	Local Board Approval date: (Required)	Date of Public Hearing: (Required)	
<b>Name of the II/USP School (s) you are requesting the waiver for:</b>			
<b>1. Under the General Waiver Authority of Education Code 33050-33053, the particular Education Code or California Code of Regulations Section(s) to be waived:</b> <u>E.C. 52054 (i) (date: May 15)</u> Circle one: E.C. or CCR Brief Description of the topic of the waiver : <u>Waiver of " May 15" date for required SBE approval of II/USP schools request for funding.</u>			
<b>2. Position of the Bargaining Unit.</b> (Required) Does the district have any employee bargaining units? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please complete below: Date(s) the bargaining unit(s) was (were) consulted: _____ / _____ / _____ Name of bargaining unit person(s) consulted: _____ The position(s) of the bargaining unit(s) was/were: <input type="checkbox"/> Neutral <input type="checkbox"/> Support <input type="checkbox"/> Oppose (Please summarize below.) Comments (if appropriate):			
<b>3. Public Hearing Requirement.</b> (A public hearing is not simply a board meeting, but a properly noticed public hearing held during a board meeting at which time the public may testify on the waiver proposal. Distribution of local board agenda does not constitute notice of a public hearing. Acceptable ways to advertise include: (1) print a notice that includes the time, date, location, and subject of the hearing in a newspaper of general circulation; or (2) in small school districts, post a formal notice at each school and three public places in the district (modeled after E.C. Section 5362). <b>How was the required public hearing advertised?.</b> <input type="checkbox"/> Notice in a newspaper? <input type="checkbox"/> Notice posted at each school? <input type="checkbox"/> Other: _____			
<b>4. Advisory Committee (Required) – USE the <u>II/USP Schoolsite and Community Team</u> as specified in E.C.52054(a)</b> Date the committee/council reviewed the waiver request: _____ (Date) Check here; if there were objection(s) <input type="checkbox"/> (Please summarize the objection(s) below.)			

**GENERAL WAIVER REQUEST .... MODIFIED FOR II/USP SCHOOLS**

GW-1 (2/99)

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- 5. Education Code or California Code of Regulations section to be waived.** If the request is to waive a portion of a section, type the text of the pertinent sentence of the law, or those exact "phrases" requested to be waived (or use a strike out key). Do not attach photocopies.

E.C. 52054(i) :

Not later than ~~May 15~~ of the year next following the year in which a school is selected for participation, the State Board of Education shall review and approve or disapprove the school's request for funding, based on the recommendation of the Superintendent of Public Instruction.

- 6. Desired outcome/rationale.** (State what you hope to accomplish with the waiver. Describe briefly the circumstances that brought about the request and why the waiver is necessary to achieve improved student performance and/or streamline or facilitate local agency operations.)

Waiver of the May 15 date is necessary to allow the II/USP school(s) time to revise their request(s) for funding so that they may be approved at the July State Board meeting.

Substitute the date: **July 15 -- instead of May 15.**

District or County Certification--*I hereby certify that the information provided on this application is correct and complete.*

Signature of Superintendent or Designee

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Title:

Date:

**FOR CALIFORNIA DEPARTMENT OF EDUCATION USE ONLY**

Responsible Office

Guidelines: ☐ Met ☐ Not Met ☐ Don't Exist

California Department of Education Recommendation: ☐ Approve ☐ Approve w/ conditions ☐ Deny

Staff (Type or print)

Staff (Signature)

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Date:

Unit Manager (Type or print)

Unit Manager (Signature)

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Date:

Division Director (Type or print)

Division Director (Signature)

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Date:

Deputy (Type or print)

Deputy (Signature)

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Date: